
POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	AH	2492	10/29/97
O.I.P.E. CLASSIFIER		12	11/2
FORMALITY REVIEW	DM	72223	11-16-97

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 ÷ Restricted

N	Non-elected
I	Interference
A	Appeal
O	Objected

Claim		Date					
Final	Original	1/23/02	7-10-02	11-24-02	6-18-03	10-16-03	5-15-04
	1	✓	✓	✓	✓	✓	✓
	2	✓	✓	✓	✓	✓	✓
	3	✓	✓	✓	✓	✓	✓
	4	✓	✓	✓	✓	✓	✓
	5	✓	✓	✓	✓	✓	✓
	6	✓	✓	✓	✓	✓	✓
	7	✓	✓	✓	✓	✓	✓
	8	✓	✓	✓	✓	✓	✓
	9	✓	✓	✓	✓	✓	✓
	10	✓	✓	✓	✓	✓	✓
	11	✓	✓	✓	✓	✓	✓
	12	✓	✓	✓	✓	✓	✓
	13	✓	✓	✓	✓	✓	✓
	14	✓	✓	✓	✓	✓	✓
	15	✓	✓	✓	✓	✓	✓
	16	✓	✓	✓	✓	✓	✓
	17	✓	✓	✓	✓	✓	✓
	18	✓	✓	✓	✓	✓	✓
	19	✓	✓	✓	✓	✓	✓
	20	✓	✓	✓	✓	✓	✓
	21	✓	✓	✓	✓	✓	✓
	22	✓	✓	✓	✓	✓	✓
	23	✓	✓	✓	✓	✓	✓
	24	✓	✓	✓	✓	✓	✓
	25	✓	✓	✓	✓	✓	✓
	26	✓	✓	✓	✓	✓	✓
	27	✓	✓	✓	✓	✓	✓
	28	✓	✓	✓	✓	✓	✓
	29	✓	✓	✓	✓	✓	✓
	30	✓	✓	✓	✓	✓	✓
	31	✓	✓	✓	✓	✓	✓
	32	✓	✓	✓	✓	✓	✓
	33	✓	✓	✓	✓	✓	✓
	34	✓	✓	✓	✓	✓	✓
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	37	✓	✓	✓	✓	✓	✓
	38	✓	✓	✓	✓	✓	✓
	39	✓	✓	✓	✓	✓	✓
	40	✓	✓	✓	✓	✓	✓
	41	✓	✓	✓	✓	✓	✓
	42	✓	✓	✓	✓	✓	✓
	43	✓	✓	✓	✓	✓	✓
	44	✓	✓	✓	✓	✓	✓
	45	✓	✓	✓	✓	✓	✓
	46	✓	✓	✓	✓	✓	✓
	47	✓	✓	✓	✓	✓	✓
	48	✓	✓	✓	✓	✓	✓
	49	✓	✓	✓	✓	✓	✓
	50	✓	✓	✓	✓	✓	✓

Claim		Date			
Final	Original	11-24-02	6-18-03	0-3-03	5-15-04
	51	✓	✓	✓	✓
	52	✓	✓	✓	✓
	53	✓	✓	✓	✓
	54	✓	✓	✓	✓
	55	✓	✓	✓	0
	56	✓	✓	✓	✓
	57	✓	✓	✓	✓
	58	✓	✓	✓	✓
	59	✓	✓	✓	✓
	60	✓	✓	✓	✓
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Claim		Date						
Final	Original							
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If more than 150 claims or 10 actions
staple additional sheet here

(1 FET INSIDE)

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